

# **MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET**

SERIAL NO.

10765919

FILING DATE

01/29/01

## **CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5		4		4		
6		4		4		
7		4		4		
8		1		1		
9		1		1		
10		2		2		
11		1		1		
12		1		1		
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TOTAL IND.	4		4			
TOTAL DEP.	16		16			
TOTAL CLAIMS	20		20			

	IND	DEP	IND	DEP	IND	DEP
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